PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

9/656987

		CLAIMS A		SMALL E	NTITY		OTHER	THAN.				
77	OTAL CLAIMS		(Column 1)		(Column 2)			TYPE		OR	SMALL	
'	TAL CLAIMS	· · · · · · · · · · · · · · · · · · ·						RATE	FEE		RATE	FEE
FC)R 		NUMBER FILED		NUME	ER EXTRA		BASIC FEE	P385	OR	BASIC FEE	3770
TC	TAL CHARGEA	ABLE CLAIMS	minus 20=		*			X\$Q=		OR	X\$18 =	·
}	DEPENDENT CI		minus 3 =		*			X43=		OR	X8b=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	REȘENT	ESENT				+145=		OR	+290=	
* If	the difference	in column 1 is	less than ze	ss than zero, enter "0" in column 2				TOTAL		OR	TOTAL	****
	CLAIMS AS AMENDED - PART II										OTHER	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	** 2	o_	<u>-</u>	1	x\$ 9 =		OR	×\$i8=	
AME	Independent	* 2 NTATION OF MI	Minus	*** 3	CI AIM]=		X43=/		OR	786	
L	Time / Tileje	WATON OF W	DETII EE DEI	LINDLIN	OLANI			+ 15:=		OR	-840-	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1) (Column 2) (Column 3)									NDD11.1 EE1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$9=		OR	x\$/8=	
AME	Independent	*	Minus	***		=		X43=		OR	×86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
		L	+145= TOTAL		OR	tage=						
										OR,	ADDIT FEE	
•	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		= .		X\$9=	~	OR	X\$18=	
AME	Independent	*	Minus	***		=	 	x/3=		OR	×86	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		+	 }				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	†∂A©= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADD ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	DDIT. FEE	
		ber Previously Paid					foun	d in the app	ropriate box	in colu	ımı 1	